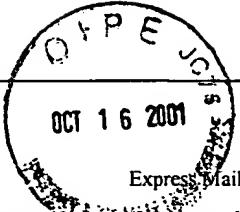


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CPA/37388
P# 19
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 OCT 16 2001	AT 2036.00
CERTIFICATE OF MAILING BY "EXPRESS MAIL"	
Express Mail Label No.: <u>EL548625256US</u>	Date of Deposit: October 16, 2001
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Commissioner for Patents, Washington, D.C. 20231. <i>Edgard Benavides</i> Edgard Benavides	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application for:

Thomas A. Silvestrini

Serial No.: 08/993,946

Filing Date: Herewith

For: CORNEAL IMPLANT METHODS AND
PLIABLE IMPLANT THEREFOR

Examiner: D. Willse

Group Art Unit: 3738

OCT 19 2001
1C 3100 MAIL ROOM

RECEIVED

CONTINUED PROSECUTION APPLICATION (CPA) REQUEST & FEE TRANSMITTAL
(for nonprovisional applications under 37 CFR § 1.53(d))

BOX CPA

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith for filing in connection with the above-identified patent application are the following:

I. CPA Request	
<input checked="" type="checkbox"/> This is a request for a continued prosecution application (CPA) of prior application number <u>08/993,946</u> filed on <u>December 18, 1997</u> , entitled <u>Corneal Implant Methods And Pliable Implant Therefor</u> .	
<input checked="" type="checkbox"/> The entire disclosure of the prior application referenced above, is considered as being part of the application filed herewith and is herein incorporated by reference in its entirety.	
<input type="checkbox"/> Enter the unentered amendment previously filed on _____.	
<input checked="" type="checkbox"/> A new power of attorney or authorization of agent under 37 C.F.R. § 3.71 is enclosed (2 pages).	
<input checked="" type="checkbox"/> Certificate Under 37 C.F.R. § 3.73(b) (1 page).	
<input type="checkbox"/> This application is filed by fewer than all the inventors named in the prior application, 37 C.F.R. § 1.53(d)(4).	
a. <input type="checkbox"/> <i>DELETE</i> the following inventor(s) named in the prior nonprovisional application: _____	
b. <input type="checkbox"/> The inventor(s) to be deleted are set forth on a separate sheet attached hereto.	

10/19/2001 TTRAN1 0000007 501189 08993946

01 FC:231 370.00 CH
02 FC:203 9.00 CH

II. Accompanying Documents

- Assignment Papers [] page(s) of Assignment Recordation Cover Sheet and []page(s) of Assignment
- Applicant(s) claim Small Entity Status under 37 CFR §1.27.
- Information Disclosure Statement (IDS) [] page(s) of PTO-1449 [] copies of IDS Citations
- A Preliminary Amendment [] page(s)
- A copy of a Petition for Extension of Time (5 months) for prior Application No. 08/993,946 filed December 18, 1997 (2 pages).
- A copy of a Submission of Processing & Retention Fee (37 C.F.R. § 1.78(a)(1) which is being filed simultaneously in prior Application No. _____
- Other (*specify*) _____
- Receipt for Facsimile Transmitted CPA (PTO/SB/29A))
- Return Receipt Postcard (MPEP 503) (*Should be specifically itemized*)

III. Fee Calculation

The following fees are submitted:

The fees to be charged are based on claims:

included in the prior application
after entry of the Amendment filed on _____
after entry of Preliminary Amendment, attached hereto.

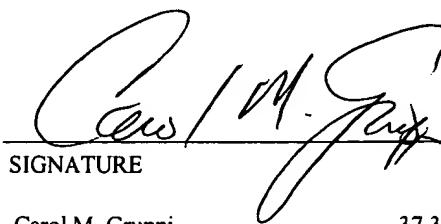
CALCULATIONS

		OTHER THAN SMALL ENTITY	SMALL ENTITY	\$
BASIC NATIONAL FILING FEE		\$ 740.00	\$ 370.00	\$370.00
CLAIMS	# FILED	# EXTRA	RATE	RATE
Total Claims	21 - 20 =	1	× \$18.00	× \$ 9.00 \$ 9.00
Independent claims	3 - 3 =	0	× \$80.00	× \$40.00 \$
MULTIPLE DEPENDENT CLAIM(S)				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			\$270.00	\$135.00 \$
Fee for recordation of the enclosed assignment (37 CFR 1.21(h), 3.28, 3.31).				
			(Numbers of Applications) × \$40.00	\$
OTHER FEES Petition For Five Month Extension Of Time				\$980.00
OTHER FEES _____ (specify)				\$
			TOTAL FEES =	\$1,359.00

- a. A check in the amount of \$_____ to cover the above fees is enclosed.
- b. Please charge my Deposit Account No. 50-1189, Docket No. 23915-7321, in the amount of \$1,359.00 to cover the above fees. *A duplicate copy of this sheet is enclosed.*
- c. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-1189, Docket No. 23915-7321.
A duplicate copy of this sheet is enclosed.

SEND ALL CORRESPONDENCE TO:

Antoinette F. Konski, Esq.
McCutchen, Doyle, Brown & Enersen, LLP
Three Embarcadero Center, 18th Floor
San Francisco, CA 94111
Telephone: (650) 849-4950


10/16/01
SIGNATURE DATE
Carol M. Gruppi 37,341
NAME REGISTRATION NUMBER
Antoinette F. Konski 34,202
NAME REGISTRATION NUMBER